POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	my-G		2/3/00
O.I.P.E. CLASSIFIER		43	2/1/00
FORMALITY REVIEW	1	09853	3/28/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date								Claim		Date								Claim		Date							
Final	Original	12 6 01	4 5 02							Final	Original									Final	Original								
	1										51										101								
	2										52										102								
	3										53										103								
1	4	✔	=								54										104								
2	5	✔	=								55										105								
3	6	✔	=								56										106								
4	7	✔	=								57										107								
5	8	✔	2								58										108								
	9										59										109								
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	48										98										148								
	49										99										149								
	50										100										150								

If more than 150 claims or 10 actions
staple additional sheet here

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